

**Initial Public Comment**  
**Urine Culture (Bacterial) and Serum Iron Studies**  
**(Revision of ICD-9-CM Codes for Pre-Operative Examinations)**  
**June 15-July 15, 2004**

Comment #1:

Submitter: Elizabeth Kosakowski, RHIT, CCS

Organization: St. Elizabeth Medical Center

Date: June 17, 2004

Comment:

**St. ELIZABETH MEDICAL CENTER**  
2209 Genesee Street • Utica, New York 13501-5999  
(315) 798-8100

June 17, 2004

Ms. Jackie Sheridan-Moore  
CMS  
7500 Security Blvd., Mailstop C1-09-06  
Baltimore, MD 21244-1850

RE: Public Comment Period for Revision of ICD-9-CM Codes for Pre-Operative Examinations for Urine Culture (Bacterial)

Dear Ms. Sheridan-Moore:

St. Elizabeth Medical Center recently received your electronic communication regarding the above referenced proposed change to covered ICD-9-CM diagnosis codes for Urine Culture (Bacterial). We are in disagreement with your proposal to exclude V72.84, pre-operative exam unspecified, as an included code on the coverage listing. To state that the inclusion of this code in the list of covered diagnoses is not appropriate for routine screening does not seem logically correct.

In support of retaining code V72.84, pre-operative exam unspecified, on the covered diagnosis list, please consider the following. In order to provide optimal quality of care for the pre-operative Medicare beneficiary, it is our belief that the patient must be free of infectious processes before undergoing any invasive procedure. It would be of poor discretion to place a beneficiary at risk during said invasive procedure when a minor laboratory test, as the one in discussion, could be the deciding factor of whether to operate or not or even forewarn the organization of alternate treatment modalities in an affected beneficiary.

It is for similar reasons that we felt the PT/PTT covered diagnosis list should have included the V72.84, pre-operative exam unspecified. A Medicare Beneficiary going into surgery for an invasive procedure may have bleeding issues which one would be aware of if PT/PTT tests/results were obtained. For the test not to be covered, again seems to place the beneficiary at unnecessary risk. Such a minor test can alert the provider and be perhaps the deciding factor regarding the course of treatment and/or whether or not the timing is appropriate for any proposed surgical intervention for the hospitalized beneficiary.

As demonstrated in the past by Peer Review Organization (PRO) studies, often times a simple process prior to such invasive procedures can impact the outcome of surgery (IE: PRO study on prophylactic antibiotics prior to arthroplasty demonstrated a recognized decrease in post-operative infections following the indicated procedure)

Thank you for allowing St. Elizabeth Medical Center to comment on this coverage/quality of care issue.

If you would prefer to further discuss this matter, please feel free to contact me at 315-734-3151.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Elizabeth Kosakowski', written in dark ink.

Elizabeth Kosakowski, RHIT, CCS

Health Information Management Operations & Coding Compliance Manager

CC: David Carlson, Director Corporate Compliance  
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